



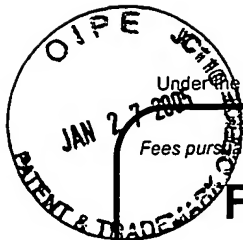
|  |                      |                        |            |
|--|----------------------|------------------------|------------|
| <b>TRANSMITTAL FORM</b><br><br><small>(to be used for all correspondence after initial filing)</small> | Application Number   | 10/825,786             |            |
|  | Filing Date          | April 16, 2004         |            |
|  | First Named Inventor | Russell A. Houser      |            |
|  | Art Unit             | 3731                   |            |
|  | Examiner Name        | unassigned             |            |
| Total Number of Pages in This Submission   | 13                   | Attorney Docket Number | 036624-009 |

| ENCLOSURES (check all that apply)  |  |   |
|--|--|---|
| <input checked="" type="checkbox"/> Fee Transmittal Form<br><br><input checked="" type="checkbox"/> Fee Attached<br><br><input type="checkbox"/> Amendment / Reply<br><br><input type="checkbox"/> After Final<br><br><input type="checkbox"/> Affidavits/declaration(s)<br><br><input checked="" type="checkbox"/> Extension of Time Request<br><br><input type="checkbox"/> Express Abandonment Request<br><br><input type="checkbox"/> Information Disclosure Statement<br><br><input type="checkbox"/> Certified Copy of Priority Document(s)<br><input checked="" type="checkbox"/> Reply to Missing Parts/<br>Incomplete Application<br><input checked="" type="checkbox"/> Reply to Missing Parts<br>under 37 CFR1.52 or 1.53 | <input type="checkbox"/> Drawing(s)<br><br><input type="checkbox"/> Licensing-related Papers<br><br><input type="checkbox"/> Petition<br><br><input type="checkbox"/> Petition to Convert to a<br>Provisional Application<br><input type="checkbox"/> Power of Attorney, Revocation<br>Change of Correspondence Address<br><br><input type="checkbox"/> Terminal Disclaimer<br><br><input type="checkbox"/> Request for Refund<br><input type="checkbox"/> CD, Number of CD(s) _____<br><input type="checkbox"/> Landscape Table on CD | <input type="checkbox"/> After Allowance Communication to TC<br><br><input type="checkbox"/> Appeal Communication to Board<br>of Appeals and Interferences<br><input type="checkbox"/> Appeal Communication to TC<br>(Appeal Notice, Brief, Reply Brief)<br><br><input type="checkbox"/> Proprietary Information<br><br><input type="checkbox"/> Status Letter<br><br><input checked="" type="checkbox"/> Other Enclosure(s)<br>(please identify below):<br>Declaration |
| <b>Remarks</b>   |  |   |

| SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT |                          |          |        |
|--|--------------------------|----------|--------|
| Firm                                       | Thelen Reid & Priest LLP |          |        |
| Signature                                  |                          |          |        |
| Printed Name                               | Robert E. Krebs          |          |        |
| Date                                       | 1/24/05                  | Reg. No. | 25,885 |

| CERTIFICATE OF TRANSMISSION/MAILING   |                |      |         |
|---|----------------|------|---------|
| I hereby certify that this correspondence is being facsimile transmitted to the USPTO or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date shown below. |                |      |         |
| Signature   |                |      |         |
| Typed or printed name   | Monica Pizarro | Date | 1/24/05 |

This collection of information is required by 37 CFR 1.5. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.



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Effective on 12/08/2004.  
Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).

## FEE TRANSMITTAL for FY 2005

☒ Applicant claims small entity status. See 37 CFR 1.27

TOTAL AMOUNT OF PAYMENT (\$) 575.00

### Complete if Known

|                      |                   |
|----------------------|-------------------|
| Application Number   | 10/825,786        |
| Filing Date          | April 16, 2004    |
| First Named Inventor | Russell A. Houser |
| Examiner Name        | unassigned        |
| Art Unit             | 3731              |
| Attorney Docket No.  | 036624-009        |

### METHOD OF PAYMENT (check all that apply)

☒ Check ☐ Credit Card ☐ Money Order ☐ None ☐ Other (please identify) : \_\_\_\_\_  
☒ Deposit Account Deposit Account Number: 50-1698 Deposit Account Name: Thelen Reid & Priest LLP

For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)

☐ Charge fee(s) indicated below ☐ Charge fee(s) indicated below, except for the filing fee  
☒ Charge any additional fee(s) or underpayments of fee(s) ☒ Credit any overpayments  
Under 37 CFR 1.16 and 1.17

WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.

### FEE CALCULATION

#### 1. BASIC FILING, SEARCH, AND EXAMINATION FEES

| Application Type | FILING FEES |                       | SEARCH FEES |                       | EXAMINATION FEES |                       | Fees Paid (\$) |
|------------------|-------------|-----------------------|-------------|-----------------------|------------------|-----------------------|----------------|
|                  | Fee (\$)    | Small Entity Fee (\$) | Fee (\$)    | Small Entity Fee (\$) | Fee (\$)         | Small Entity Fee (\$) |                |
| Utility          | 300         | 150                   | 500         | 250                   | 200              | 100                   | _____          |
| Design           | 200         | 100                   | 100         | 50                    | 130              | 65                    | _____          |
| Plant            | 200         | 100                   | 300         | 150                   | 160              | 80                    | _____          |
| Reissue          | 300         | 150                   | 500         | 250                   | 600              | 300                   | _____          |
| Provisional      | 200         | 100                   | 0           | 0                     | 0                | 0                     | _____          |

#### 2. EXCESS CLAIM FEES

| Fee Description  |              | Small Entity |               |
|--|--------------|--------------|---------------|
|  |              | Fee (\$)     | Fee (\$)      |
| Each claim over 20 (including Reissues)                                |              | 50           | 25            |
| Each independent claim over 30 (including Reissues)                    |              | 200          | 100           |
| Multiple dependent claims  |              | 360          | 180           |
| Total Claims   | Extra Claims | Fee (\$)     | Fee Paid (\$) |
| _____ -20 or HP= _____   | x _____      | = _____      | _____         |
| HP = highest number of total claims paid for, if greater than 20.      |              |              |               |
| Indep. Claims  | Extra Claims | Fee (\$)     | Fee Paid (\$) |
| _____ - 3 or HP= _____   | x _____      | = _____      | _____         |
| HP = highest number of independent claims paid for, if greater than 3. |              |              |               |

#### 3. APPLICATION SIZE FEE

If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).

| Total Sheets        | Extra Sheets | Number of each additional 50 or fraction thereof | Fee (\$) | Fee Paid (\$) |
|---------------------|--------------|--|----------|---------------|
| _____ - 100 = _____ | / 50 = _____ | (round up to a whole number) x _____             | = _____  | _____         |

#### 4. OTHER FEE(S)

Non-English Specification, \$130 fee (no small entity discount)

Other (e.g., late filing surcharge): 3 month extension of time (\$510.00); Surcharge (\$65.00) \$575.00

### SUBMITTED BY

|                   |                 |                                      |         |           |              |
|-------------------|-----------------|--------------------------------------|---------|-----------|--------------|
| Signature         |                 | Registration No.<br>(Attorney/Agent) | 25,885  | Telephone | 408.292.5800 |
| Name (Print/Type) | Robert E. Krebs | Date                                 | 1/24/05 |           |              |

This collection of information is required by 37 CFR 1.136. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 30 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

If you need assistance in completing this form, call 1-800-PTO-9199 (1-800-786-9199) and select option 2.



## IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

APPLICANT: Russell A. Houser et al.  
SERIAL NO.: 10/825,786 CONFIRMATION NO.: 9055  
FILING DATE: April 16, 2004  
TITLE: Method and Devices for Treating Ischemic Congestive Heart Failure  
EXAMINER: unassigned  
ART UNIT: 3731

**CERTIFICATE OF MAILING**

I hereby certify that this paper is being deposited with the United States Postal Service as First Class  
Mail in an envelope addressed to: MAIL STOP MISSING PARTS Commissioner for Patents, P.O. Box 1450  
Alexandria, VA 22313-1450, on the date printed below:

Date: 1/24/05 Name: Monica Pizarro  
Monica Pizarro

MAIL STOP MISSING PARTS  
Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450

**RESPONSE TO NOTICE TO FILE MISSING PARTS**

Responsive to the Notice to File Missing Parts dated **August 23, 2004**, please find the following:

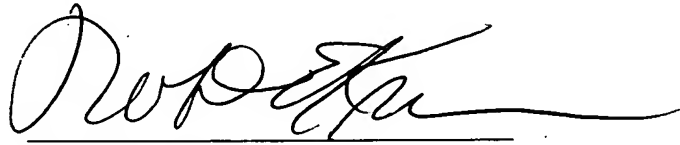
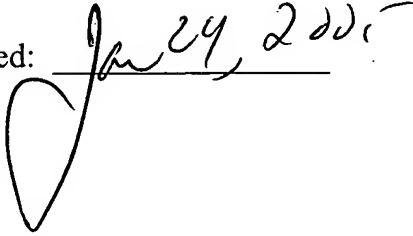
1. Declaration executed by the inventor(s);
2. Enclosed is our check in the amount of \$ 575.00 calculated as follows:

|   |                 |
|---|-----------------|
| 3 month extension of time – Fee Code 2253 | \$ 510.00       |
| <u>Surcharge - Fee Code 2051</u>          | <u>\$ 65.00</u> |
| Total                                     | \$ 575.00       |
3. Copy of Notice to File Missing Parts; and
4. A 3 month extension of time.

The Commissioner is hereby authorized to charge any additional fees or credit any overpayment to Deposit Account No. 50-1698.

Respectfully submitted,  
THELEN REID & PRIEST LLP

Dated: Jan 29, 2005



Robert E. Krebs  
Reg. No. 25,885

THELEN REID & PRIEST LLP  
P.O. Box 640640  
San Jose, CA 95164-0640  
(408) 292-5800 direct dial  
(408) 287-8040 direct fax



CHFT.004A  
VAC/LXX

UNITED STATES PATENT AND TRADEMARK OFFICE

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United States Patent and Trademark Office  
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P.O. Box 1450  
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www.uspto.gov

| APPLICATION NUMBER | FILING OR 371 (c) DATE | FIRST NAMED APPLICANT | ATTORNEY DOCKET NUMBER |
|--------------------|------------------------|-----------------------|------------------------|
| 10/825,786         | 04/16/2004             | Houser                | CHFT.004A              |

20995  
KNOBBE MARTENS OLSON & BEAR LLP  
2040 MAIN STREET  
FOURTEENTH FLOOR  
IRVINE, CA 92614

CONFIRMATION NO. 9055

FORMALITIES LETTER



\*OC000000013584244\*

Date Mailed: 08/23/2004

**NOTICE TO FILE MISSING PARTS OF NONPROVISIONAL APPLICATION**

**FILED UNDER 37 CFR 1.53(b)**

*Filing Date Granted*

**Items Required To Avoid Abandonment:**

An application number and filing date have been accorded to this application. The item(s) indicated below, however, are missing. Applicant is given **TWO MONTHS** from the date of this Notice within which to file all required items and pay any fees required below to avoid abandonment. Extensions of time may be obtained by filing a petition accompanied by the extension fee under the provisions of 37 CFR 1.136(a).

- The oath or declaration is missing.  
*A properly signed oath or declaration in compliance with 37 CFR 1.63, identifying the application by the above Application Number and Filing Date, is required.*
- To avoid abandonment, a late filing fee or oath or declaration surcharge as set forth in 37 CFR 1.16(e) of \$65 for a small entity in compliance with 37 CFR 1.27, must be submitted with the missing items identified in this letter.

**SUMMARY OF FEES DUE:**

Total additional fee(s) required for this application is **\$65** for a Small Entity

- **\$65** Late oath or declaration Surcharge.

Replies should be mailed to: Mail Stop Missing Parts  
Commissioner for Patents  
P.O. Box 1450  
Alexandria VA 22313-1450

01/31/2005 DEMMANU1 00000018 10825786

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65.00 OP

*A copy of this notice **MUST** be returned with the reply.*

  
Customer Service Center

Initial Patent Examination Division (703) 308-1202

PART 1 - ATTORNEY/APPLICANT COPY